615-253-8704

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Date

8.	AGGREGATE TOTAL OF ALL IN-STATE EVENTS	
	the aggregate total amount of all employer expenditures for all in-State ed to the Commission pursuant to T.C.A. § 3-6-305(b)(8). Authority: T.	
9.	TO BE SIGNED BY REPORTING OFFICIAL (must be attested to	by a witness)
best o	I certify that the information contained in this Report is true and that it f my knowledge, information and belief.	is a complete and accurate report to the
	Dana oleffentracer	5-23-07
	Ure of Person Completing Report Name of Person: Dana Heffentrager	Date
aecura	I, the undersigned, acknowledge that I have reviewed the foregoing ate to the best of my knowledge, information and belief.	Report and certify that is complete and
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	U white	5-23-07
Signal Print N	ture of CEO, CFO or Authorized Representative Name of Person: Joyce Whitmer	Date
I, <u>An</u>	gela Webster , the undersigned, do hereby witness the	



Signature of Witness

MOISSIME STANDARD TO STANDARD and the state of t